



## ROOM AND ISOLATION CONFINEMENT RECORD

## ISOLATION CONFINEMENT

## 14. DESCRIPTION OF BEHAVIOR REQUIRING ISOLATION

## 15. REASON FOR ISOLATION (CHECK APPROPRIATE BOX)

## An immediate Threat:

- ☐ **A** of physical harm to self or other
- ☐ **B** of escape (for only so long as the intent to escape persists)

- ☐ **C** or continued threat of destruction to property as evidence by past behaviors
- ☐ **D** or continued disturbance in living unit

## 16. CONFINEMENT TIME

TIME IN

TIME OUT

TOTAL TIME

HOURS

MINUTES

17. Review Within 2 Hours by  
Non-Isolating Staff

NON-ISOLATING STAFF SIGNATURE

DATE

TIME

WHAT ISOLATION WILL ACCOMPLISH

FACTORS TO DETERMINE RELEASE

18. Review Within 4 Hours by  
Non-Isolating Supervisor

NON-ISOLATING SUPERVISOR SIGNATURE

DATE

TIME

WHAT ISOLATION WILL ACCOMPLISH

FACTORS TO DETERMINE RELEASE

19. Review Within 8 Hours by  
Non-Isolating Supervisor

NON-ISOLATING SUPERVISOR SIGNATURE

DATE

TIME

WHAT ISOLATION WILL ACCOMPLISH

FACTORS TO DETERMINE RELEASE

20. Review Within 12 Hours  
by O.D.

O.D. SIGNATURE

DATE

TIME

WHAT ISOLATION WILL ACCOMPLISH

FACTORS TO DETERMINE RELEASE

21. Review Within 16 Hours  
by O.D.

NON-ISOLATING SUPERVISOR SIGNATURE

DATE

TIME

WHAT ISOLATION WILL ACCOMPLISH

FACTORS TO DETERMINE RELEASE

22. Review Within 20 Hours  
by O.D.

NON-ISOLATING SUPERVISOR SIGNATURE

DATE

TIME

WHAT ISOLATION WILL ACCOMPLISH

FACTORS TO DETERMINE RELEASE

23. Review Within 24 Hours  
by O.D.

NON-ISOLATING SUPERVISOR SIGNATURE

DATE

TIME

WHAT ISOLATION WILL ACCOMPLISH

FACTORS TO DETERMINE RELEASE

24. Contact director or designee for approval beyond 24 hours.

O.D. SIGNATURE

DATE

TIME

## ROOM AND ISOLATION CONFINEMENT RECORD

NAME OF YOUTH

## CONFINEMENT REQUIREMENTS

## RECORD REQUIRED CONTACTS

1. Half-hour checks
2. Twice daily counseling
3. Daily shower
4. One hour/day release time
5. Medical check by nurse

## ROOM CONFINEMENT REVIEWS

Staff.....	Prior to 1 hour
Supervisor.....	Within 5 hours
O.D.....	Prior to 24 hours
O.D.....	Prior to 48 hours

## ISOLATION REVIEWS

Staff.....	2 hours	O.D. ....	16 hours
Supervisor.....	4 hours	O.D. ....	20 hours
Supervisor.....	8 hours	O.D. ....	24 hours
O.D.....	12 hours	Director .....	Beyond 24 hours

## DOCUMENTED CONTACTS

[illegible]